Healthcare Law Alert: Not Ready to Attest to Provider Relief Funds? HHS Allows Providers to Reject Payment and Reapply for Total Funds by Today, June 3rd, with New 90-Day Window to Attest

June 3, 2020 - The Department of Health & Human Services (HHS) has extended the time for all providers to attest to their Provider Relief Fund payment, from 45 days to 90 days from receipt of payment. Providers who retain payments for more than 90 days will be deemed to have accepted the Terms and Conditions. As we reported in our Healthcare Law Alert on Friday, providers have until today, June 3rd, to apply for the second Provider Relief payment. Importantly, HHS now explains that if a provider is not ready to attest to a payment at this time, but still wants to be considered for the second Provider Relief Fund payment, the provider must take the following actions by today, JUNE 3rd: 1) reject the first payment on the Attestation Portal, 2) initiate the return of the payment through your bank, and 3) submit the requested revenue documents through the General Distribution Portal in order for HHS to calculate your total combined payment. The provider's rejection of the initial payment will not preclude the provider from receiving the total amount of relief payments, which is approximately 2% of revenues from 2018.

HHS also clarifies that if a provider affirmatively attests to a Provider Relief Fund payment and later wishes to reject those funds and retract the attestation, the provider may do so by calling the provider support line at 866-569-3522.

If you have any questions about this alert or any other Healthcare Law issue, please contact:

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